



## Research Grant Program

Applications for grants are reviewed by the APMSA Research Grant Review Panel and awarded on a competitive basis with the maximum amount of funding of three (3), \$1,000 grants. Grants are paid in two equal installments—one in advance and the other upon completion of the research program requirements. Unutilized funds must be returned to APMSA.

A completed application including all supporting materials must be emailed to Maddie Baker at [maddie.baker@apmsa.org](mailto:maddie.baker@apmsa.org).

### GENERAL INFORMATION

#### General Purpose and Application Instruction

Grants are available from the APMSA to aid student researchers in the investigation of areas significant to podiatric medicine. The goal of the program is to encourage research and contributions to the advancement of podiatric medicine. Applicants must be students in good standing in predoctoral podiatric medical programs. Each application must have a Research Advisor assigned to the research project. A discussion of the aims and relevance of the proposed research project must be attached to this application in sufficient detail for evaluation by the APMSA Research Grant Review Panel.

***Electronically submit one original and one redacted copy of the completed application and supporting materials.***

#### Letter of Recommendation and Curriculum Vitae

A supporting letter from the applicant's research advisor is required and must accompany this application. In addition, curriculum vitae (CVs) from the Principal Investigator, Research Advisor, and all Co-Investigators are required.

#### Human Subjects

Applications related to research on human subjects must have approval of the podiatric medical education institution designated in this application and must be of the type approved by the U.S. Department of Health and Human Services. Awarded funds will not be dispersed until such approval is demonstrated.

#### Distribution of Funds

Grants are paid directly to the Research Advisor (two equal installments; one in advance and the other upon completion of the research program requirements) designated in the application and are to be used only for the project for which the application was made. Unutilized funds must be returned to APMSA.



## **POLICIES AND PROCEDURES**

### **I. Introduction**

The APMSA and its Partners Program may provide one or more grants each year to selected applicants for student research projects. The award recipients will be chosen by a Research Grant Review Panel. No single grant award will exceed \$1000.

### **II. Goals and Objectives**

The goal of the APMSA Research Grant Program is to stimulate research at the predoctoral level, which contributes to the fund of knowledge in podiatric medicine. It is intended to foster an enthusiasm for scientific investigation among students of podiatric medicine. The grant program is designed to encourage podiatric medical schools to establish environments and support mechanisms conducive to quality research. Furthermore, it is an objective of the grant program to stimulate writing and publication by students at the colleges of podiatric medicine.

### **III. Procedures**

#### **A. Application Requirements**

1. Eligibility - The APMSA Research Grant Program is open to all APMSA dues-paying predoctoral students of an accredited college of podiatric medicine. Applicants must be in good standing in their podiatric medical education program and are required to have a Research Advisor. The Research Advisor may be from outside a college of podiatric medicine per approval of the Director of Research at the student's college. The student applicant serves as the Principal Investigator (*PI*) of the project; projects may be authored by multiple students (co-investigators), but only one student can be designated as the *PI*.

The Research Advisor will be solely responsible for all financial concerns related to the APMSA Grant. The Research Advisor will receive the grant from the APMSA and will be responsible should the terms of the grant not be fulfilled.

2. Receipt of Applications - Completed applications must be electronically submitted to Maddie Baker at [maddie.baker@apmsa.org](mailto:maddie.baker@apmsa.org) to be considered. You will receive electronic confirmation of your application after the included materials have been inventoried.

The following application components are required:

- research abstract (not to exceed 300 words);
- project description (not to exceed 10 double-spaced pages);
- budget data and justification;
- letter of recommendation from the Research Advisor; and
- curriculum vitae from every member of the investigation team.

Incomplete applications will not be considered.



In addition, all applications related to research on human subjects must have institutional approval by the PI's college of podiatric medicine in compliance with the U.S. Department of Health and Human Services before funding is dispersed.

3. Budget Proposal - Each applicant must complete all components of the application including budgetary data and cost justification. The review panel should clearly understand how the applicant has constructed the proposed costs and how they are relevant to the study. The APMSA grant program does not provide compensation for labor costs of any member of the investigative team. The application instructions provide a detailed explanation of items related to the budget section.

## **B. Notification**

The recipients of the APMSA Grant Program awards will be notified via email if their project is approved. Award recipients will be asked to submit a high-resolution digital photograph of the Principal Investigator and Research Advisor to grant the APMSA authority to use the photographs for APMSA publicity purposes.

## **C. Accountability and Reporting**

The APMSA imposes no formal limitation as to the type of research required or the subject matter of each proposal. However, applications found to be relevant to the study of podiatric medicine will be given preference. Projects limited solely to literature reviews or case studies will not be considered for awards. Ongoing projects previously funded by APMSA are eligible for repeat consideration and additional funding if warranted.

Grant recipients must complete two progress reports with photos regarding the progress of the funded project. A final summary statement for the APMSA regarding the outcome of the funded project is due at completion of the grant cycle. The summary statement must include a detailed accounting of the funds allocated and a complete description of the project's findings. APMSA requires the Principal Investigator to submit this summary statement no later than 60 days after the termination of the project. In the event that the project has not been completed after one year, the Principal Investigator must submit a written statement of project progression with an indication of when the project will terminate.

Any publication or additional presentation of APMSA funded research, in whole or in part from APMSA Research Grant monies requires an APMSA acknowledgment to that effect. Publication requests must go to JAPMA before any other publication. All grant recipients are to submit their Grant recipients (PIs) and Research Advisors agree by signature to a stipulation of financial and professional accountability in the application process.



**American Podiatric Medical Students' Association  
Research Grant Program**

**APPLICATION**

*(Please type or print with black ink - Electronic copies only!)*

Title of Research Project: \_\_\_\_\_

\_\_\_\_\_

Name of Applicant: \_\_\_\_\_

(Principal Investigator)

Current Address: \_\_\_\_\_

\_\_\_\_\_

Mobile Number: \_\_\_\_\_

Podiatric Medical College: \_\_\_\_\_

Address of POD College: \_\_\_\_\_

\_\_\_\_\_

Phone Number (POD College) \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

Research Advisor: \_\_\_\_\_

Title (Position): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Co-Investigator(s): \_\_\_\_\_

(List all names and addresses)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



### Project Description

Describe your proposal in sufficient detail for adequate evaluation. Make every effort to be succinct and use figures or tables to summarize your plans if necessary. Begin with an abstract of the proposed research, not to exceed 300 words, and then continue with a detailed description. Please limit this description to no more than 10 pages.

Your project description should include:

1. Specific Goals:                      What do you hope to accomplish?  
  What is the hypothesis to be tested?
2. Significance:                        Why is the research important?  
  How does it relate to podiatric medicine?
3. Literature Review:                 Evaluate existing knowledge in the field.
4. Experimental design:              How are you going to accomplish the research? Describe the experimental design, the procedures used, and the method of data analyses.
5. Literature cited:

### Budget Data

Provide a detailed budget as a separate attachment. Include a concise statement of how you propose to allocate funds and for what purpose. Itemize equipment, supplies, patient care, or other expenses that you anticipate.

### Certification and Verification

I certify that the statements in this application are true to the best of my knowledge. I agree that the awarded funds will be used only for the purpose reflected in my application. I agree that unobligated funds are to be returned to APMSA within 60 days of the completion of the grant. I hereby agree to provide a written progress and financial report to the APMSA within 60 days of the termination of the project. Additionally, I hereby agree to acknowledge the APMSA Partners in any publications resulting from this research project. Finally, if I am awarded an APMSA research grant, I agree to provide APMSA with a current high-resolution digital photograph and authorize APMSA to use my photograph for publicity purposes.

\_\_\_\_\_  
Signature of Principal Investigator (PI)

\_\_\_\_\_  
Signature of Research Advisor

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Please email one original copy and one redacted copy of the application and all supporting materials to Maddie Baker at [maddie.baker@apmsa.org](mailto:maddie.baker@apmsa.org)



**American Podiatric Medical Students' Association  
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**CHECKLIST FOR APMSA RESEARCH GRANT APPLICATION**

It is essential that all applications are complete. This checklist must accompany each application.

**Name of Principal Investigator:** \_\_\_\_\_  
Last First M.I.

**Research Advisor:** \_\_\_\_\_  
Last First M.I.

**Co-Investigators:** \_\_\_\_\_  
Last First M.I.  
\_\_\_\_\_  
Last First M.I.  
\_\_\_\_\_  
Last First M.I.  
\_\_\_\_\_  
Last First M.I.

**Title of Research Project:** \_\_\_\_\_

**Checklist:**

- One (1) copy of the complete application
- One (1) redacted copy of the completed application
- All signatures included
- CVs from PI, research advisor and all co-Investigators enclosed
- Supporting letters enclosed
- Project description enclosed
- Budget enclosed
- Completed applications must be emailed to Maddie Baker at [maddie.baker@apmsa.org](mailto:maddie.baker@apmsa.org)